

16310 U.S. PTO
120903

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| PATENT APPLICATION TRANSMITTAL (37 CFR §1.53(b)) | Atty Docket No.: 6425-1 | Total Pages: 13 |
| | First Inventor or Application Identifier: Peter Klotz | |
| | Express Mail Label No. (37 CFR 1.10): EV 330 371 839 US | |

Mail Stop: PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

This application claims priority of the German Application DE 102 57 687.4 filed December 10, 2002.

Re: Applicant(s) or Identifier: Peter Klotz
Serial No. : To Be Assigned
Filed : Herewith
Title : Polishing Device

Kindly file the annexed papers indicated below:

- ☒ Original application for Patent including Specification (10 pages) and Drawing (3 pages, Figs. 1-6)
☒ Return Receipt Postcard
☐ Executed Declaration and Power of Attorney
☐ Signed Assignment

The fee has been calculated as follows:

| | Claims | Claims Paid for | Extra | Rate (Sm. Ent.) | Fee | Rate (Lg. Ent.) | Fee |
|----------------------------------|--------|-----------------|-------|--------------------|-----|--------------------|-----|
| BASIC FILING FEE | | | | \$ 385 | \$ | \$770 | \$ |
| Total | 12 | - 20 = | 0 | x \$9 | \$ | \$18 | \$ |
| Indep. | 1 | - 3 = | 0 | x \$43 | \$ | \$86 | \$ |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | + \$140 | \$ | \$0 | \$0 |
| | | | | TOTAL | \$ | | \$ |

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☐ Check in the amount of \$_____ to cover the filing fee of \$_____ which includes the Assignment Fee of \$_____.

The Commissioner is hereby authorized to charge any additional fees which may be required or credit any overpayment to the undersigned attorney's Deposit Account No. 02-4270.

Correspondence address: Use Customer Number 29858.

Dated: December 9, 2003

Respectfully Submitted,
By: Robert M. Bauer
Robert Bauer, Reg. No. 34,487
Brown Raysman Millstein Felder & Steiner LLP
Attorney for Applicants
900 Third Avenue
New York, New York 10022
Phone: (212) 895-2000 Fax: (212) 895-2900

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